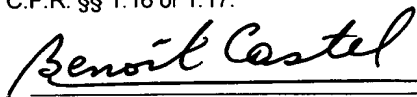


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| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | Attorney Docket No. 0546-1089 |
| | | U.S. Application No. 10/583,943 |
| INTERNATIONAL APPLN. NO. PCT/EP2004/053559 | INTERNATIONAL FILING DATE December 17, 2004 | PRIORITY DATE CLAIMED December 23, 2003 |
| TITLE OF INVENTION: PREFORM FEEDER SYSTEM, PARTICULARLY OF A RECEPTACLE BLOWING MACHINE, COMPRISING MEANS FOR EJECTING BADLY POSITIONED PREFORMS | | |
| APPLICANT(S) FOR DO/EO/US: Alain CHARPENTIER | | |
| <p>Applicant herewith submits to the United States Designated Elected Office (DO/EO/US) the following items and other information:</p> <ol style="list-style-type: none"> <input type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. <input checked="" type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below. <input type="checkbox"/> The US has been elected (Article 31). <input type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2)) <ol style="list-style-type: none"> <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). <input type="checkbox"/> has been communicated by the International Bureau. See attached PCT/IB/308. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)) <ol style="list-style-type: none"> <input type="checkbox"/> is attached hereto. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)) <ol style="list-style-type: none"> <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). <input type="checkbox"/> have been communicated by the International Bureau. <input type="checkbox"/> have not been made, however, the time limit for making such amendments has NOT expired. <input type="checkbox"/> have not been made and will not be made. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)). <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)) <input type="checkbox"/> A Declaration of Inventorship for purposes of U.S.A. designation pursuant to rule 4.17(iv.)) <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). <p>Items 12 to 23 below concern document(s) or information included:</p> <ol style="list-style-type: none"> <input type="checkbox"/> Information Disclosure Statement (IDS) w/PTO-1449 - <input type="checkbox"/> Copy of IDS citations. - <input type="checkbox"/> PCT/ISA/210 International Search Report included <input type="checkbox"/> Assignment Papers (cover sheet & document(s)). <input type="checkbox"/> A preliminary amendment. <input type="checkbox"/> An Application Data Sheet under 37 C.F.R. 1.76. <input type="checkbox"/> Itemized Return Receipt Postcard <input type="checkbox"/> Abstract <input type="checkbox"/> A substitute specification. <input type="checkbox"/> Power of Attorney and Statement under 37 CFR §3.73(b) <ol style="list-style-type: none"> <input type="checkbox"/> Newly executed Power of Attorney <input type="checkbox"/> A change of Power of Attorney and/or change of address letter. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4). <input type="checkbox"/> A second copy of the English language translation of the international application (35 U.S.C. 154(d)(4)). <input type="checkbox"/> Other items or information: _____ | | |

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| U.S. APPLICATION NO. 10/583,943 | | INTERNATIONAL APPLN. NO. PCT/EP2004/053559 | | ATTORNEY DOCKET NO. 0546-1089 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> The following fees are submitted: <p style="text-align: center;">PCT FEES - NATIONAL STAGE</p> | | | | CALCULATIONS PTO USE ONLY | |
| | | | | | |
| <u>Fee Description</u> | | | | | |
| Basic National Stage Fee | | | | | |
| Non ISA/US Search Provided | | National Stage Search Fee | | | |
| <input type="checkbox"/> US was the IPEA And all claims satisfied the provisions of PCT Article 33 (1)-(4) | | National Stage Examination Fee | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617) | | | | Already Paid | |
| National Stage Application size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681 | | Additional Sheets 22 - 100 = 0 = _____ X <div style="text-align: center; border-top: 1px solid black; width: 50px; margin: 0 auto;">50</div> | | Fee From Below \$125.00 | |
| CLAIMS | | NUMBER FILED | NUMBER EXTRA | RATE | |
| Independent Claims Fee Codes 1614 / 2614 | | 1 - 3 = | 0 | x \$100.00 | |
| Total Claims Fee Codes 1615 / 2615 | | 20 - 20 = | 0 | x \$25.00 | |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 | | | | + \$360.00 | |
| Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). Fee Code 1618 | | | | | |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property + | | | | | |
| TOTAL FEES ENCLOSED | | | | = | |
| | | | | Amount to be refunded: | \$ |
| | | | | Charged: | \$ |
| <input type="checkbox"/> A check in the amount of _____ to cover the above fees is attached. <input type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fee required under 37 C.F.R. §§ 1.16 or 1.17. | | | | | |
| SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON 745 South 23 rd Street Arlington, VA 22202 Telephone: (703) 521-2297 Facsimile: (703) 685-0573 Y&T Customer No. 00466 BC/sj | | |  SIGNATURE Benoit Castel, Reg. No. 35,041 NAME, REGISTRATION NUMBER July 21, 2006 DATE | | |